

Questionnaire

Your responses are confidential

Please answer all 14 questions to the best of your ability. When you have completed the questionnaire, fold and send this sheet only in the enclosed pre-paid return envelope. If you do not wish to complete this survey, please return only the pre-paid return envelope.

1) Please look at the six numbered illustrations that accompany this questionnaire. Each illustration shows a different level of development in a Vermont town. Please rate the acceptability of each illustration, paying special attention to the amount of development. A rating of -4 means the illustration is "very unacceptable" and a rating of +4 means the illustration is "very acceptable". Please circle one number for each illustration.

Very Unacceptable	<----->	Very Acceptable						
Illustration 1								
-4	-3	-2	-1	0	1	2	3	4
Illustration 2								
-4	-3	-2	-1	0	1	2	3	4
Illustration 3								
-4	-3	-2	-1	0	1	2	3	4
Illustration 4								
-4	-3	-2	-1	0	1	2	3	4
Illustration 5								
-4	-3	-2	-1	0	1	2	3	4
Illustration 6								
-4	-3	-2	-1	0	1	2	3	4

2) Look again at the six illustrations. Which illustration shows the level of development that you prefer? (Please choose one answer)

Illustration number _____

3) Which illustration looks most like the town you live in? (Please choose one answer)

Illustration number _____
 OR
 None of the illustrations look like my town

4) Which illustration shows so much development that you would not want to live in this town? (Please choose one answer)

Illustration number _____
 OR
 I would live in any of the illustrated towns.

5) Which illustration shows the maximum level of development that a town should allow? (Please choose one answer)

Illustration number _____
 OR
 None of the illustrations show enough development to need regulation.
 OR
 Development should not be regulated.

6) Is Vermont your primary residence?

	Yes	No
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7) Were you born in Vermont?

8) Do you own the dwelling you live in?

9) What year were you born?

Year _____

10) Please look at the six images labeled Illustration A through E on the last page of the attached booklet. Each illustration shows a different amount and pattern of development.

Please rate the acceptability of each illustration, paying special attention to the amount and pattern of development. A rating of -4 means the illustration is "very unacceptable" and a rating of +4 means the illustration is "very acceptable". Please circle one number for each illustration.

Very Unacceptable <-----> Very Acceptable

Illustration A (50 houses)
-4 -3 -2 -1 0 1 2 3 4

Illustration B (50 houses)
-4 -3 -2 -1 0 1 2 3 4

Illustration C (100 houses)
-4 -3 -2 -1 0 1 2 3 4

Illustration D (100 houses)
-4 -3 -2 -1 0 1 2 3 4

Illustration E (150 houses)
-4 -3 -2 -1 0 1 2 3 4

Illustration F (150 houses)
-4 -3 -2 -1 0 1 2 3 4

11) Do you believe there should be a change in the amount of wildlife in your town?
(Please circle one answer)

Less Wildlife ↔ No Change ↔ More Wildlife
-4 -3 -2 -1 0 1 2 3 4

12) Which of the following outdoor activities do you participate in? (Please check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> Birding | <input type="checkbox"/> Farming/Gardening |
| <input type="checkbox"/> Hiking | <input type="checkbox"/> Snowmobiling |
| <input type="checkbox"/> Hunting | <input type="checkbox"/> Camping |
| <input type="checkbox"/> Fishing | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Off road ATVing | <input type="checkbox"/> None of the above |

13) How acceptable would it be to have the following animal live in or near your town?

Very Unacceptable <-----> Very Acceptable

Black Bear
-4 -3 -2 -1 0 1 2 3 4

Fisher
-4 -3 -2 -1 0 1 2 3 4

Raccoon
-4 -3 -2 -1 0 1 2 3 4

Deer
-4 -3 -2 -1 0 1 2 3 4

Bobcat
-4 -3 -2 -1 0 1 2 3 4

Coyote
-4 -3 -2 -1 0 1 2 3 4

Fox
-4 -3 -2 -1 0 1 2 3 4

14) What is your current completed level of education? (Please choose one answer)

- | | |
|--|--|
| <input type="checkbox"/> High School/GED | <input type="checkbox"/> Doctorate Degree |
| <input type="checkbox"/> Associate Degree | <input type="checkbox"/> Technical School |
| <input type="checkbox"/> Bachelor's Degree | <input type="checkbox"/> Professional Degree |
| <input type="checkbox"/> Master's Degree | <input type="checkbox"/> None of the above |

Thank you for helping us with our study.
Your participation is greatly appreciated.

